Image# 14970880230 PAGE 1 / 17

## FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

|                    |   |                  |                           |               |                          |                    |             | Office        | Use Only           |   |
|--------------------|---|------------------|---------------------------|---------------|--------------------------|--------------------|-------------|---------------|--------------------|---|
| 1. NAME<br>COMM    | OF<br>ITTEE (in full)                                       | TYPE OR P        | RINT ▼                    |               | le: If typin<br>e lines. | g, type            | 12FE        | 4M5           |                    |   |
| Midwes             | t Values PAC  |                  |                           |               |                          |                    |             |               |                    | ı   |
|                    |   |                  |                           |               |                          |                    |             |               |                    |   |
|                    |   |                  |                           |               |                          |                    |             |               |                    |   |
| ADDRESS            | (number and street)   | P.O. Box         | 583232                    |               |                          |                    |             |               |                    |   |
| Ch                 | neck if different   |                  |                           |               |                          |                    |             |               |                    |   |
|                    | an previously<br>ported. (ACC)                              | Minneapo         | olis                      |               |                          |                    | MN          | 554           | 58                 |   |
| 2. <b>FEC I</b> C  | DENTIFICATION NU  | IMBER ▼          | CIT                       | Υ▲            |                          |                    | STATE 🛦     |               | ZIP CO             | DE 🛦  |
| С                  | C00416131   |                  |                           | THIS<br>EPORT | \ \ \ \                  | EW<br>N) <b>OR</b> |             | AMENDE<br>(A) | D                  |   |
| 4. TYPE<br>(Choose | OF REPORT<br>e One)   | (b) Mont<br>Repo | ort -                     | 20 (M2)       | N.                       | May 20 (M5)        |             | Aug 20 (M8    | i)                 | Nov 20 (M11)<br>(Non-Election<br>Year Only) |
| (a) Qu             | uarterly Reports:   | Due              | Mar                       | 20 (M3)       |                          | un 20 (M6)         | ×           | Sep 20 (M9    |                    | Dec 20 (M12)<br>(Non-Election<br>Year Only) |
| П                  | April 15<br>Quarterly Report (Q                             | 1)               | Apr 2                     | 20 (M4)       | J                        | ul 20 (M7)         |             | Oct 20 (M1)   | 0)                 | Jan 31 (YE)                                 |
| ō                  | July 15  Quarterly Report (Q                                | (C)              | 12-Day  PRE-Election      | Pri           | mary (12P)               | )                  | Ger         | neral (12G)   |                    | Runoff (12R)                                |
|                    | October 15  |                  | Report for the:           | Co            | nvention (1              | 12C)               | Spe         | ecial (12S)   |                    |   |
| ă                  | Quarterly Report (Q<br>January 31<br>Year-End Report (Y     |                  | Election                  | n on          | M = M /                  | D   D /            | Y II Y II Y | Y             | in the<br>State o  | f   |
|                    | July 31 Mid-Year<br>Report (Non-election<br>Year Only) (MY) | (d)              | 30-Day POST-Election      | Ge            | eneral (30G              | i)                 | Rur         | noff (30R)    |                    | Special (30S)                               |
|                    | Termination Report (TER)                                    |                  | Report for the:  Election | n on          | M M /                    | D D /              | Y Y Y       | Y             | in the<br>State o  | f   |
| 5. Coverin         | ng Period 08  |                  | 2014                      |               | through                  | M M M              | 31          |               | 2014               |   |
| I certify that     | t I have examined thi                                       | is Report ar     | d to the best of          | my knowle     | dge and b                | elief it is tru    | ie, correc  | ct and comp   | lete.              |   |
| Type or Prir       | nt Name of Treasurer  | Thomas E         | Borman                    |               |                          |                    |             |               |                    |   |
| Signature of       | f Treasurer Thom  | as Borman        |                           | [El           | ectronically             | Filed]             | Date        |               | 20 /               | 2014  |
| NOTE: Subn         | nission of false, errone                                    | eous, or inco    | mplete information        | may subje     | ct the pers              | on signing th      | nis Repor   | t to the pena | alties of 2 l      | J.S.C. §437g.                               |
|                    | office<br>Use   |                  |                           |               |                          |                    |             | FE            | C FOR<br>Rev. 12/2 |   |
|                    | Only  |                  |                           | ı             |                          |                    |             |               | . 10 1. 12/2       |   |

## SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Midwest Values PAC 80 2014 08 2014 Report Covering the Period: 31 From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 33383.98 January 1, 2014 (b) Cash on Hand at 13514.17 Beginning of Reporting Period..... 19304.13 148261.57 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 32818.30 181645.55 6(a) and 6(c) for Column B)..... 21561.12 170388.37 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 11257.18 11257.18 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations Owed BY the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

### **DETAILED SUMMARY PAGE**

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

### Midwest Values PAC

| Receipts  The ret than loans) From: Persons Other Formula Committees  (use Schedule A)   | COLUMN A Total This Period  5740.00  1264.00  7004.00  0.00  5000.00  12004.00  7300.00  0.00   | COLUMN B Calendar Year-to-Date  83190.00  10681.80  93871.80  0.00  20000.00  113871.80  32600.00  0.00 |
|--|---|---|
| ersons Other al Committees (use Schedule A)  | 1264.00<br>7004.00<br>0.00<br>5000.00<br>12004.00<br>7300.00  | 10681.80<br>93871.80<br>0.00<br>20000.00<br>113871.80<br>32600.00                                       |
| al Committees  (use Schedule A)  ed  | 1264.00<br>7004.00<br>0.00<br>5000.00<br>12004.00<br>7300.00  | 10681.80<br>93871.80<br>0.00<br>20000.00<br>113871.80<br>32600.00                                       |
| ed   | 1264.00<br>7004.00<br>0.00<br>5000.00<br>12004.00<br>7300.00  | 10681.80<br>93871.80<br>0.00<br>20000.00<br>113871.80<br>32600.00                                       |
| ed   | 1264.00<br>7004.00<br>0.00<br>5000.00<br>12004.00<br>7300.00  | 10681.80<br>93871.80<br>0.00<br>20000.00<br>113871.80<br>32600.00                                       |
| add (a)(i) and (ii)  by Committees al Committees (Cs)  putions (add Lines , and (c)) (Carry e 33, page 5)  Affiliated/Other s  ed  s Received  | 7004.00<br>0.00<br>5000.00<br>12004.00<br>7300.00<br>0.00   | 93871.80<br>0.00<br>20000.00<br>113871.80<br>32600.00   |
| add (a)(i) and (ii)  by Committees al Committees (Cs)  putions (add Lines , and (c)) (Carry e 33, page 5)  Affiliated/Other s  ed  s Received  | 7004.00<br>0.00<br>5000.00<br>12004.00<br>7300.00<br>0.00   | 93871.80<br>0.00<br>20000.00<br>113871.80<br>32600.00   |
| ty Committees  | 0.00<br>5000.00<br>12004.00<br>7300.00  | 0.00<br>20000.00<br>113871.80<br>32600.00   |
| al Committees  | 0.00<br>5000.00<br>12004.00<br>7300.00  | 0.00<br>20000.00<br>113871.80<br>32600.00   |
| al Committees Cs) putions (add Lines , and (c)) (Carry e 33, page 5) Affiliated/Other s  | 7300.00<br>7300.00<br>0.00  | 20000.00<br>113871.80<br>32600.00   |
| al Committees Cs) putions (add Lines , and (c)) (Carry e 33, page 5) Affiliated/Other s  | 7300.00<br>0.00   | 113871.80<br>32600.00   |
| outions (add Lines , and (c)) (Carry e 33, page 5)  Affiliated/Other s ed  | 7300.00<br>0.00   | 113871.80<br>32600.00   |
| and (c)) (Carry e 33, page 5)  Affiliated/Other s  ed  s Received  | 7300.00   | 32600.00  |
| e 33, page 5)  | 7300.00   | 32600.00  |
| Affiliated/Other seds Received   | 7300.00   | 32600.00  |
| eds Received   | 0.00  |   |
| eds Received   | 0.00  |   |
| s Received   |   | 0.00  |
| s Received   |   | 7   |
|  | 0.00  |   |
|  | 0.00  | 0.00  |
|  |   | 0.00  |
| iting Expenditures   |   |   |
| es, etc.)  | 0.00  | 1789.19   |
|  | 7   | 7   |
|  |   |   |
| The second secon | 0.00  | 0.00  |
| eceipts  | 7   |   |
|  | 0.13  | 0.58  |
| on-Federal and Levin Funds   | 7   |   |
| Account  |   |   |
| ule H3)  | 0.00  | 0.00  |
|  |   |   |
| (from Schedule H5)   | 0.00  | 0.00  |
|  |   |   |
| s (add 18(a) and 18(b))  | 0.00  | 0.00  |
| i i e e l  | Line 37, page 5) ributions Made idates and Other rees ecceipts est, etc.) Ion-Federal and Levin Funds Account dule H3)  (from Schedule H5)  rs (add 18(a) and 18(b))  add Lines 11(d), 16, 17, and 18(c)) | ributions Made idates and Other rees  |

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date       |  |  |
|--|-------------------------------|---|--|--|
| . Operating Expenditures:  (a) Allocated Federal/Non-Federal | rotal fillo i criou           | Calelidai Teal-10-Date                  |  |  |
| Activity (from Schedule H4)                                  |                               |   |  |  |
| (i) Federal Share  | 0.00                          | 0.00                                    |  |  |
| (") N - 5 1 - 1 0 1 0 1 - 1                                  | 0.00                          | 0.00                                    |  |  |
| (ii) Non-Federal Share(b) Other Federal Operating            | 0.00                          | 0.00                                    |  |  |
| Expenditures   | 6561.12                       | 93888.37                                |  |  |
| (c) Total Operating Expenditures                             |                               |   |  |  |
| (add 21(a)(i), (a)(ii), and (b)) ▶                           | 6561.12                       | 93888.37                                |  |  |
| Transfers to Affiliated/Other Party                          | 0.00                          | 0.00                                    |  |  |
| Contributions to   | 0.00                          | 0.00                                    |  |  |
| Federal Candidates/Committees and Other Political Committees | 15000.00                      | 71500.00                                |  |  |
| Independent Expenditures                                     | 0.00                          | 0.00                                    |  |  |
| (use Schedule E)   |                               |   |  |  |
| (2 U.S.C. §441a(d)) (use Schedule F)                         | 0.00                          | 0.00                                    |  |  |
| Loan Repayments Made   | 0.00                          | 0.00                                    |  |  |
| Loans MadeRefunds of Contributions To:                       | 0.00                          | 0.00                                    |  |  |
| (a) Individuals/Persons Other                                | 0.00                          | 5000.00                                 |  |  |
| Than Political Committees                                    | 0.00                          | 5000.00                                 |  |  |
| (b) Political Party Committees                               | 0.00                          | 0.00                                    |  |  |
| (c) Other Political Committees                               | 0.00                          | 0.00                                    |  |  |
| (such as PACs)   | 0.00                          | 0.00                                    |  |  |
| (d) Total Contribution Refunds                               |                               |   |  |  |
| (add Lines 28(a), (b), and (c))▶                             | 0.00                          | 5000.00                                 |  |  |
|  |                               |   |  |  |
| Other Disbursements  | 0.00                          | 0.00                                    |  |  |
| Federal Election Activity (2 U.S.C. §431(20))                |                               |   |  |  |
| (a) Allocated Federal Election Activity                      |                               |   |  |  |
| (from Schedule H6)   |                               |   |  |  |
| (i) Federal Share  | 0.00                          | 0.00                                    |  |  |
| (ii) "Levin" Share   | 0.00                          | 0.00                                    |  |  |
| (b) Federal Election Activity Paid Entirely                  | 3.00                          |   |  |  |
| With Federal Funds   | 0.00                          | 0.00                                    |  |  |
| (c) Total Federal Election Activity (add                     |                               |   |  |  |
| Lines 30(a)(i), 30(a)(ii) and 30(b))▶                        | 0.00                          | 0.00                                    |  |  |
| Total Disbursements (add Lines 21(c), 22,                    |                               |   |  |  |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c))                     | 21561.12                      | 170388.37                               |  |  |
|  | 21001.12                      | 170300.37                               |  |  |
| Total Federal Disbursements                                  |                               |   |  |  |
| (subtract Line 21(a)(ii) and Line 30(a)(ii)                  |                               | 1 |  |  |
| from Line 31)  | 21561.12                      | 170388.37                               |  |  |

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                              | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 3. Total Contributions (other than loans) (from Line 11(d), page 3)        | 12004.00                      | 113871.80                         |
| 4. Total Contribution Refunds (from Line 28(d))                            | 0.00                          | 5000.00                           |
| 5. Net Contributions (other than loans) (subtract Line 34 from Line 33)    | 12004.00                      | 108871.80                         |
| 6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 6561.12                       | 93888.37                          |
| 7. Offsets to Operating Expenditures (from Line 15, page 3)                | 0.00                          | 1789.19                           |
| 3. Net Operating Expenditures (subtract Line 37 from Line 36)              | 6561.12                       | 92099.18                          |

## SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 6 OF

| TEMIZED RECEIPTS   | for each category of the Detailed Summary Page   | (check only one)    X   11a   |
|--|--|---|
|  | d Statements may not be sold or used by any p<br>the name and address of any political committee | erson for the purpose of soliciting contributions   |
| NAME OF COMMITTEE (In Full)  Midwest Values PAC  |  |   |
| Full Name (Last, First, Middle Initial)  Joanne Chester  Mailing Address 702 W Pennsylvania Ave  City Urbana  FEC ID number of contributing federal political committee.  Name of Employer N/A  Receipt For:  Primary General Other (specify)                  | State Zip Code IL 61801  C  Occupation None  Aggregate Year-to-Date ▼                            | Date of Receipt  08 24 2014  Transaction ID : C9390706  Amount of Each Receipt this Period  50.00 |
| Full Name (Last, First, Middle Initial)  Ruth E Dick  Mailing Address 3560 Redwood Ave  City Los Angeles  FEC ID number of contributing federal political committee.  Name of Employer N/A  Receipt For: Primary General Other (specify)                       | State Zip Code CA 90066  C  Occupation Retired  Aggregate Year-to-Date ▼                         | Date of Receipt  08 01 2014  Transaction ID: C9418145  Amount of Each Receipt this Period  30.00  |
| Full Name (Last, First, Middle Initial)  Fay C Graning  Mailing Address 6100 Westchester Park Dri Apt 404  City College Park  FEC ID number of contributing federal political committee.  Name of Employer  N/A  Receipt For:  Primary General Other (specify) | State Zip Code MD 20740  C  Occupation Retired  Aggregate Year-to-Date ▼  250.00                 | Date of Receipt  08 05 2014  Transaction ID : C9372934  Amount of Each Receipt this Period  50.00 |
| SUBTOTAL of Receipts This Page (optional).   |  | 130.00  |
| TOTAL This Period (last page this line numb  | er only)   |   |

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

|                          | FOR LI   | NE NU   | IMBER | : | PAGE | : | 7  | OF |   |
|--------------------------|----------|---------|-------|---|------|---|----|----|---|
| Use separate schedule(s) | (check   | only or | ne)   |   |      |   |    |    | _ |
| for each category of the | X 11     |         | ا منا |   | ا بد |   | 40 |    |   |
| Detailed Summary Page    | <u> </u> | a       | 11b   |   | 11c  |   | 12 |    |   |
| ., ., .,                 | 13       |         | 14    |   | 15   |   | 16 | ſ  |   |

| ny information copied from such Reports an   | nd Statements may not be sold or used by any pers  | son for the purpose of soliciting contributions               |
|--|--|---|
| for commercial purposes, other than using  | the name and address of any political committee to |   |
| NAME OF COMMITTEE (In Full)  Midwest Values PAC  |  |   |
| Full Name (Last, First, Middle Initial)<br>Kim Kieves                                    |  | Date of Receipt   |
| Mailing Address 5020 Woodhurst Lane  |  | 08 16 2014  |
| City<br>Minnetonka   | State Zip Code<br>MN 55345                         | Transaction ID : C9381679  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.                               | C  | 5000.00   |
| Name of Employer  N/A  Receipt For:  Primary  General                                    | Occupation Retired  Aggregate Year-to-Date ▼       | -   |
| Other (specify) ▼  | 5000.00  |   |
| Full Name (Last, First, Middle Initial)  Nicholas Lavrov  Mailing Address 240 Carrite St |  | Date of Receipt   |
| Mailing Address 910 Cerrito St  City   | State Zip Code                                     | 08 15 2014 Transaction ID : C9418169                          |
| Albany   | CA 94706-1522                                      | Amount of Each Receipt this Period                            |
| FEC ID number of contributing federal political committee.                               | C  | 60.00   |
| Name of Employer<br>Self-Employed  | Occupation  Real Estate Broker                     |   |
| Receipt For:  Primary General  Other (specify) ▼   | Aggregate Year-to-Date ▼ 480.00                    |   |
| Full Name (Last, First, Middle Initial) Catherine M Mccartin                             |  | Date of Receipt   |
| Mailing Address 28 Plainfield Ave  |  | 08 15 2014  |
| City<br>Metuchen   | State Zip Code<br>NJ 08840                         | Transaction ID : C9418157  Amount of Each Receipt this Period |
| FEC ID number of contributing federal political committee.                               | C  | 50.00   |
| Name of Employer   | Occupation   | 1   |
| N/A<br>Receipt For:  | Not Employed                                       | -   |
| Primary General Other (specify) ▼  | Aggregate Year-to-Date ▼  350.00                   |   |
| SUBTOTAL of Receipts This Page (optional   | )  | 5110.00   |
|  |  |   |
| OTAL This Period (last page this line numb   | ber only)  |   |

## SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

| FOR LINE     | NUMBER: | PAGE | 8 OF | 17 |
|--------------|---------|------|------|----|
| (check only  | one)    |      |      |    |
| <b>X</b> 11a | 11b     | 11c  | 12   |    |
| 13           | 14      | 15   | 16   | 17 |

|   | d Statements may not be sold or used by any persithe name and address of any political committee to |   |  |  |  |
|---|---|---|--|--|--|
| NAME OF COMMITTEE (In Full) Midwest Values PAC  |   |   |  |  |  |
| Full Name (Last, First, Middle Initial)  A. Rosemarie Swanson  Mailing Address 3604 Cavitt Ave  | Rosemarie Swanson   |   |  |  |  |
| City Bryan  FEC ID number of contributing federal political committee.  Name of Employer  N/A  Receipt For:  Primary General  Other (specify) | State Zip Code TX 77801  C  Occupation Retired  Aggregate Year-to-Date ▼  500.00                    | Transaction ID : C9381997  Amount of Each Receipt this Period  500.00 |  |  |  |
| Full Name (Last, First, Middle Initial)  Mailing Address  City  | State Zip Code  | Date of Receipt   |  |  |  |
| FEC ID number of contributing federal political committee.  Name of Employer  | Occupation  | Amount of Each Receipt this Period                                    |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼  | Aggregate Year-to-Date ▼  |   |  |  |  |
| Full Name (Last, First, Middle Initial)  Mailing Address  |   | Date of Receipt   |  |  |  |
| City  | State Zip Code  | Amount of Each Receipt this Period                                    |  |  |  |
| FEC ID number of contributing federal political committee.  | С   |   |  |  |  |
| Name of Employer  Receipt For:  | Occupation  |   |  |  |  |
| Primary General Other (specify) ▼   | Aggregate Year-to-Date ▼  |   |  |  |  |
| SUBTOTAL of Receipts This Page (optional)   |   | 500.00  |  |  |  |
| TOTAL This Period (last page this line numb   | er only)  | 5740.00   |  |  |  |

| SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS                                   |   | Use separate schedule(s)<br>for each category of the<br>Detailed Summary Page | FOR LINE NUMBER: PAGE 9 OF 17 (check only one)  11a 11b X 11c 12  13 14 15 16 17                   |  |  |
|--|---|---|--|--|--|
|  |   |   | person for the purpose of soliciting contributions e to solicit contributions from such committee. |  |  |
| NAME OF COMMITTEE (In Full)  Midwest Values PAC                              |   |   |  |  |  |
| Full Name (Last, First, Middle Initial)  A. New York Life Insurance Politica | I Action Commit   | tee   | Date of Receipt  |  |  |
| Mailing Address 51 Madison Avenue<br>Room 1109                               |   |   | 08 11 2014   |  |  |
| City<br>New York   | State<br>NY   | Zip Code<br>10010   | Transaction ID : C9376060  Amount of Each Receipt this Period                                      |  |  |
| FEC ID number of contributing federal political committee.                   | C co  | 0158881   | 5000.00  |  |  |
| Name of Employer   | Occupation  |   |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                             | Aggregate   | Year-to-Date ▼ 5000.00  |  |  |  |
| Full Name (Last, First, Middle Initial) <b>B.</b>                            | Full Name (Last, First, Middle Initial)   |   |  |  |  |
| Mailing Address  |   |   | Date of Receipt  |  |  |
| City   | State   | Zip Code  | Amount of Each Receipt this Period   |  |  |
| FEC ID number of contributing federal political committee.                   | С   |   | Amount of Each Necept this Feriou  |  |  |
| Name of Employer   | Occupation  |   |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                             | Aggregate   | Year-to-Date ▼  |  |  |  |
| Full Name (Last, First, Middle Initial)                                      |   |   | Date of Receipt  |  |  |
| Mailing Address  |   |   | M = M / D = D / Y = Y = Y  |  |  |
| City   | City State Zip Code  FEC ID number of contributing federal political committee. |   | Amount of Each Receipt this Period   |  |  |
|  |   |   | Autount of Each Floodipt this Folia  |  |  |
| Name of Employer   | Occupation  |   |  |  |  |
| Receipt For:  Primary General  Other (specify) ▼                             | Aggregate   | Year-to-Date ▼  |  |  |  |
| SUBTOTAL of Receipts This Page (option                                       | nal)  |   | 5000.00  |  |  |

TOTAL This Period (last page this line number only).....

5000.00

| SCHEDULE A (FEC Form 3X TEMIZED RECEIPTS  |                                | Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 10 OF 17 (check only one)  11a 11b 11c X 12 13 14 15 16 17                |
|---|--------------------------------|---|---|
| Any information copied from such Reports and<br>or for commercial purposes, other than using          |                                |   | erson for the purpose of soliciting contributions to solicit contributions from such committee. |
| NAME OF COMMITTEE (In Full)  Midwest Values PAC   |                                |   |   |
| Full Name (Last, First, Middle Initial) FRANKEN MVPS  Mailing Address PO BOX 583144  City MINNEAPOLIS | State<br>MN                    | Zip Code<br>55458   | Date of Receipt  08 12 2014  Transaction ID: C9381406  Amount of Each Receipt this Period       |
| FEC ID number of contributing federal political committee.  | C coo                          | 480814  | 7300.00   |
| Name of Employer  Receipt For:  Primary General  Other (specify) ▼                                    | Occupation  Aggregate          | Year-to-Date ▼<br>32600.00  |   |
| Full Name (Last, First, Middle Initial) Choctaw Nation of Oklahoma Mailing Address PO Box 1210        |                                |   | Date of Receipt   |
| City Durant  FEC ID number of contributing federal political committee.                               | State<br>OK                    | Zip Code<br>74702-1210  | 08 12 2014  Transaction ID : C9381408  Amount of Each Receipt this Period  2300.00              |
| Name of Employer N/A  Receipt For:  Primary General  Other (specify) ▼                                | Occupation<br>N/A<br>Aggregate | Year-to-Date ▼<br>2300.00   | [MEMO ITEM]   |
| Full Name (Last, First, Middle Initial)  Mille Lacs Band Ojibwe  Mailing Address 43408 Oodena Dr      |                                | , ,   | Date of Receipt  08 01 2014   |
| City Onamia   | State<br>MN                    | Zip Code<br>56359-2236  | Transaction ID : C9381407  Amount of Each Receipt this Period                                   |
| FEC ID number of contributing federal political committee.  Name of Employer                          | Occupation                     |   | 5000.00   |
| N/A Receipt For:  Primary General Other (specify) ▼   | N/A Aggregate                  | Year-to-Date ▼ 5000.00  | [MEMO ITEM]  *  |
| SUBTOTAL of Receipts This Page (optional)   |                                |   | 7300.00   |

TOTAL This Period (last page this line number only).....

7300.00

| SCHEDULE B (FEC Form 3X)   |   | FOR LINE NUMBER: PAGE 11 O |                      |                        |  |  |
|--|---|----------------------------|----------------------|------------------------|--|--|
| ITEMIZED DISBURSEMENTS   | Use separate schedule(s) for each category of the | (check only                | one)                 |                        |  |  |
|  | Detailed Summary Page                             | X 21b 27                   | 22 23<br>28a 28b     | 24 25 26<br>28c 29 30b |  |  |
| Any information copied from such Reports and State or for commercial purposes, other than using the na |   |                            |                      |                        |  |  |
| NAME OF COMMITTEE (In Full)  Midwest Values PAC  |   |                            |                      |                        |  |  |
| Full Name (Last, First, Middle Initial)  |   |                            | Date of Disbursement |                        |  |  |
| A. ADP, Inc.   |   |                            | M M / D D            | /                      |  |  |
| Mailing Address 504 Clinton Center Dr Ste. 4400  |   |                            | 08 08                | 2014                   |  |  |
| City<br>Clinton  | State Zip Code<br>MS 39056                        |                            | Transaction ID : I   | D472500                |  |  |
| Purpose of Disbursement Payroll Service Fees   |   |                            | Amount of Each Di    | sbursement this Period |  |  |
| Candidate Name   |   | Category/                  | Amount of Lacif bi   |                        |  |  |
| Office Sought: House Disburs   | ement For:  | Type                       |                      | 61.74                  |  |  |
| Senate President   | Primary General Other (specify) ▼                 |                            |                      |                        |  |  |
| State: District:   |   |                            |                      |                        |  |  |
| Full Name (Last, First, Middle Initial) <b>B.</b> ADP, Inc.  |   |                            | Date of Disburseme   | _                      |  |  |
| Mailing Address 504 Clinton Center Dr Ste. 4400  |   |                            | 08 22                | 2014                   |  |  |
| City<br>Clinton  | State Zip Code<br>MS 39056                        |                            | Transaction ID :     | D472501                |  |  |
| Purpose of Disbursement Payroll Service Fees   |   | · · ·                      | Amount of Each Di    | sbursement this Period |  |  |
| Candidate Name   |   | Category/<br>Type          |                      | 68.74                  |  |  |
| Senate President   | ement For:  Primary General  Other (specify)      | ~                          |                      |                        |  |  |
| State: District:  Full Name (Last, First, Middle Initial)  |   |                            |                      |                        |  |  |
| C. Bankcard Assoc  |   | Date of Disbursem          | ent                  |                        |  |  |
| Mailing Address 2221 W. Broadway   |   |                            | 08 04                | 2014                   |  |  |
| City Fort Worth  | State Zip Code<br>TX 76112                        |                            | Transaction ID :     | D472503                |  |  |
| Purpose of Disbursement<br>Credit Card Processing Fees   |   |                            | Amount of Each Di    | sbursement this Period |  |  |
| Candidate Name   |   | Category/<br>Type          |                      | 137.38                 |  |  |
| Office Sought: House Disburse Senate President State: District:  | ement For:  Primary General  Other (specify) ▼    |                            |                      |                        |  |  |
| SUBTOTAL of Disbursements This Page (optional)   |   |                            |                      | 267.86                 |  |  |
| TOTAL This Period (last page this line number onl  |   |                            |                      |                        |  |  |

## S ľ

| SCHEDULE B (FEC Form 3X) |  |   | FOR LINE NUMBER: PAGE 12 |   |               |           |   |       |           |       | iE 12     | OF 17    |       |           |  |
|--------------------------|--|---|--------------------------|---|---------------|-----------|---|-------|-----------|-------|-----------|----------|-------|-----------|--|
| ITEMIZED DISBURSEMENTS   |  | Use separate schedule(s) for each category of the |                          |   | -             | only      |   | _     | ٦         |       |           |          |       |           |  |
|                          |  |   | Summary Page             |   | ×             | 21b<br>27 | 22<br>28a                                   |       | 23<br>28b |       | 24<br>28c | 25       |       | 26<br>30b |  |
| <u> </u>                 |  |   |                          |   |               |           |   |       |           |       |           |          |       |           |  |
|                          | ny information copied from such Reports and Statem<br>for commercial purposes, other than using the name |   |                          |   |               |           |   |       |           |       |           |          |       |           |  |
|                          | NAME OF COMMITTEE (In Full)  |   |                          |   |               |           |   |       |           |       |           |          |       |           |  |
|                          | Midwest Values PAC   |   |                          |   |               |           |   |       |           |       |           |          |       |           |  |
| _                        | Full Name (Last, First, Middle Initial)  |   |                          |   |               |           |   |       |           |       |           |          |       |           |  |
| Α.                       | - Bremer Bank  |   |                          |   |               |           |   | of Di | sburse    |       |           | YYY      | II V  |           |  |
|                          | Mailing Address 2100 Bremer Tower, 445 Minnesota S   |   |                          |   |               |           |   | _     |           | 22    |           | 2014     | _     |           |  |
|                          | City   | State   | Zip Code                 |   |               |           | Tron  | 0004  | ion ID    |       | 472504    | l        |       |           |  |
|                          | Saint Paul   | MN  | 55101                    |   |               |           | iran  | Sact  | ion ib    | ט : ט | 472304    | •        |       |           |  |
|                          | Purpose of Disbursement Bank Fees  |   |                          |   |               |           |   | nt of | Each      | Dis   | bursen    | ent this | Per   | iod       |  |
|                          | Candidate Name   |   |                          |   | tegor<br>Type | y/        |   |       |           |       |           | 3        | 33.33 | 3         |  |
|                          | Office Sought: House Disbursen   | nent For:   |                          | ' | урс           |           |   |       | ,         |       | 7         |          |       |           |  |
|                          | Senate   | Primary   | General                  |   |               |           |   |       |           |       |           |          |       |           |  |
|                          | President  | Other (spec                                       | cify) 🔻                  |   |               |           |   |       |           |       |           |          |       |           |  |
|                          | State: District:   |   |                          |   |               |           |   |       |           |       |           |          |       |           |  |
| _                        | Full Name (Last, First, Middle Initial)  |   |                          |   |               |           |   |       |           |       |           |          |       |           |  |
| В.                       | · Capital Accounting Services  |   |                          |   |               |           | Date of                                     | of Di | sburse    | eme   | nt        |          |       |           |  |
|                          | Mailing Address 620 Wesley Commons Drive   |   |                          |   |               |           | 08 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |       |           |       |           |          |       |           |  |
|                          | City State Zip Code  |   |                          |   |               |           |   |       |           |       |           |          |       |           |  |
|                          | ,  | MN  | Zip Code<br>55427        |   |               |           | Tran  | sact  | ion ID    | ) : D | 47250     | 5        |       |           |  |
|                          | Purpose of Disbursement  |   | 00 121                   | - | _             |           |   |       |           |       |           |          |       |           |  |
|                          | Compliance Consulting  |   |                          |   |               |           | Amour                                       | nt of | Each      | Dis   | bursen    | ent this | Per   | iod       |  |
|                          | Candidate Name   |   |                          |   |               | y/        |   |       |           |       |           | 150      | 00.00 | ,         |  |
|                          | 0//  |   |                          | Т | Гуре          |           |   | -     | 7         |       | - 7       | 130      | 0.00  |           |  |
|                          | Office Sought: House Disbursen Senate  |   | Conoral                  |   |               |           |   |       |           |       |           |          |       |           |  |
|                          |  | Primary Other (spec                               | General                  |   |               |           |   |       |           |       |           |          |       |           |  |
|                          | State: District:   | Other (opec                                       | y) <b>∀</b>              |   |               |           |   |       |           |       |           |          |       |           |  |
| _                        | Full Name (Last, First, Middle Initial)  |   |                          |   |               |           |   |       |           |       |           |          |       |           |  |
| C.                       | Hudson Bay of Illinois   |   |                          |   |               |           | Date of                                     | of Di | sburse    | eme   | nt        |          |       |           |  |
|                          |  |   |                          |   |               |           | M   | 1 /   | D         | D     | / Y       | YY       | l Y   | 1         |  |
|                          | Mailing Address 11032 Vera Cruz Ave N  |   |                          |   |               |           |   | 4     | C         | 8     |           | 2014     | _     |           |  |
|                          | City   | State   | Zip Code                 |   |               |           | Tran  |       | ian ID    | D     | 472507    | ,        |       |           |  |
|                          |  | MN  | 55316                    |   |               |           | iran  | Saci  | ion iL    | ט: ט  | 472507    |          |       |           |  |
|                          | Purpose of Disbursement Fundraising Services   |   |                          |   |               |           |   |       |           |       |           |          |       |           |  |
|                          | Candidate Name   |   |                          |   |               |           | Amour                                       | nt of | Each      | Dis   | bursen    | ent this | Per   | iod       |  |
|                          | Candidate Name   |   |                          |   | tegor<br>Гуре | y/        |   |       |           |       |           | 83       | 32.49 | )         |  |
|                          | Office Sought: House Disbursen   | nent For:   |                          |   | ype           | $\dashv$  |   | _     | 7         | -     | 7         |          |       |           |  |
|                          |  | Primary   | General                  |   |               |           |   |       |           |       |           |          |       |           |  |
|                          |  | Other (spec                                       | cify) 🔻                  |   |               |           |   |       |           |       |           |          |       |           |  |
| _                        | State: District:   |   |                          |   |               |           |   |       |           |       |           |          |       |           |  |
| Г                        | ·  |   |                          |   |               |           |   | _     | _         |       | _         |          | _     | _         |  |
| s                        | SUBTOTAL of Disbursements This Page (optional)   |   |                          |   |               | •         |   |       | 7         |       | 7         | 236      | 5.82  |           |  |
| H                        |  |   |                          |   |               |           |   |       |           |       |           | -        |       |           |  |
| [ T                      | <b>OTAL</b> This Period (last page this line number only)  |   |                          |   |               | •         |   |       | ,         |       | - 1       |          | -     |           |  |

## S 17

|   | FOR LINE NUMBER: PAGE 13 OF  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
|   | (orleast orlin)  |  |  |  |  |  |  |  |
| Detailed Summary Page                           |  |  | 25 26  |  |  |  |  |  |
|   |  |  | 29 306   |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
|   |  |  | -  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
| Merchant Services                               |  |  |  |  |  |  |  |  |
| Mailing Address 890 Mountain Ave.               |  |  |  |  |  |  |  |  |
|   |  | Transaction ID : D472508   | 1  |  |  |  |  |  |
| NJ 07974  |  | Transaction ID . D472300   | '  |  |  |  |  |  |
|   |  | Amount of Each Disbursem   | ent this Period  |  |  |  |  |  |
|   | Category/<br>Type  |  | 27.99  |  |  |  |  |  |
| nent For:                                       |  |  |  |  |  |  |  |  |
| Primary General                                 |  |  |  |  |  |  |  |  |
| Other (specify) ▼                               |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
|   |  | Data of Dishursoment   |  |  |  |  |  |  |
|   |  |  | YYY  |  |  |  |  |  |
| Mailing Address 2211 North First Street         |  |  |  |  |  |  |  |  |
| State Zip Code                                  |  | T  |  |  |  |  |  |  |
| CA 95131  |  | Transaction ID : D4/2510   | )  |  |  |  |  |  |
|   |  | Amount of Each Disbursement this Perio   |  |  |  |  |  |  |
|   | Category/  |  | 258.18   |  |  |  |  |  |
| nent For:                                       | Турс   |  |  |  |  |  |  |  |
| Primary General                                 |  |  |  |  |  |  |  |  |
| Other (specify) ▼                               |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
|   |  | Date of Disbursement   |  |  |  |  |  |  |
|   |  |  | 2014   |  |  |  |  |  |
| Mailing Address 504 Clinton Center Dr Ste. 4400 |  |  |  |  |  |  |  |  |
| State Zin Code                                  |  |  |  |  |  |  |  |  |
|   |  | Transaction ID: D465937  | •  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
|   |  | Amount of Each Disbursem   | ent this Period  |  |  |  |  |  |
|   | Category/  |  | 1760.20  |  |  |  |  |  |
|   | Туре   |  | 1700.20  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
|   |  |  |  |  |  |  |  |  |
| Other (specify) =                               |  |  |  |  |  |  |  |  |
| Other (specify)                                 |  |  |  |  |  |  |  |  |
| Other (specily)                                 |  |  |  |  |  |  |  |  |
| Other (specify)                                 | ······•  |  | 2046.37  |  |  |  |  |  |
|   | for each category of the Detailed Summary Page ments may not be sold or une and address of any political p | Use separate schedule(s) for each category of the Detailed Summary Page  ments may not be sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of any political committee to the sold or used by any persone and address of an | Use separate schedule(s) for each category of the Detailed Summary Page    State   Zip Code   NJ 07974 |  |  |  |  |  |

## S 17

| SCHEDULE B (FEC Form 3X) |   |             | FOR LINE NUMBER: PAGE 14 OF |          |             |          |     |        |                      |         |      | 17     |          |       |      |
|--------------------------|---|-------------|-----------------------------|----------|-------------|----------|-----|--------|----------------------|---------|------|--------|----------|-------|------|
| ITEMIZED DISBURSEMENTS   |   | Use sepa    | (check only                 |          |             | y one)   |     |        |                      |         |      |        |          |       |      |
|                          |   |             | Summary Page                |          | X           | 21b      | Щ   | 22     |                      | 23      |      | 24     | 25       |       | 26   |
| <u> </u>                 |   | <u> </u>    |                             |          |             | 27       | Щ   | 28a    |                      | 28b     |      | 28c    | 29       |       | 30b  |
|                          | ny information copied from such Reports and Statem for commercial purposes, other than using the name |             |                             |          |             |          |     |        |                      |         |      |        |          |       |      |
| $\setminus$              | NAME OF COMMITTEE (In Full)   |             |                             |          |             |          |     |        |                      |         |      |        |          |       |      |
| $ \rangle$               | Midwest Values PAC  |             |                             |          |             |          |     |        |                      |         |      |        |          |       |      |
| _                        | Full Name (Last, First, Middle Initial)   |             |                             |          |             |          |     |        |                      |         |      |        |          |       |      |
| Α.                       | · ADP, Inc.   |             |                             |          |             |          |     |        | Date of Disbursement |         |      |        |          |       |      |
|                          | Mailing Address 504 Clinton Center Dr Ste. 4400   |             |                             |          |             |          | L   | 08     | ]                    | 1       |      | Ľ      | 2014     |       |      |
|                          | City  | State       | Zip Code                    |          |             |          |     | Trans  |                      | ID      | . n  | 465938 |          |       |      |
|                          | · · · · · · · · · · · · · · · · · · ·   | MS          | 39056                       |          |             |          |     | irans  | sact                 | טו ווסו | יט : | 400930 |          |       |      |
|                          | Purpose of Disbursement Payroll Taxes   |             |                             |          |             |          | Α   | moun   | t of                 | Each    | Dis  | bursem | ent this | Per   | riod |
|                          | Candidate Name  |             |                             |          | egor        | y/       |     |        |                      |         |      |        | 56       | 60.76 | 3    |
|                          | Office Sought: House Disbursen  | nent For:   |                             | - 1      | ype         |          | r a | AENA.  | LITE                 | - NA1   |      | 7      |          |       |      |
|                          | Senate  | Primary     | General                     |          |             |          | Li  | ИЕМС   | וווכ                 | = IVI ] |      |        |          |       |      |
|                          | State: District:  | Other (spe  | cify) 🔻                     |          |             |          |     |        |                      |         |      |        |          |       |      |
| _                        | Full Name (Last, First, Middle Initial)   |             |                             |          |             |          |     |        |                      |         |      |        |          |       |      |
| В.                       | Emily M Smith   |             |                             |          |             |          | D   | ate o  | f Dis                | sburse  | me   | nt     |          |       |      |
|                          |   |             |                             |          |             |          | П   | M = M  | /                    |         | D    | / Y    | YY       | - Y   | 1    |
|                          | Mailing Address 415 Oak Grove Street, #521  |             |                             |          |             |          |     | 80     | _                    | 1       | 5    |        | 2014     | _     | _    |
|                          | •   | State<br>MN | Zip Code                    |          |             |          |     | Trans  | sact                 | ion ID  | : D  | 465939 | ı        |       |      |
|                          | Minneapolis Purpose of Disbursement   | IVIN        | 55403                       |          |             |          |     |        |                      |         |      |        |          |       |      |
|                          | Payroll   |             |                             | $\Gamma$ | ī           |          | Α   | moun   | t of                 | Each    | Dis  | bursem | ent this | Per   | riod |
|                          | Candidate Name  |             |                             |          | egor        | y/       |     |        |                      |         |      |        | 119      | 99.44 | 4    |
|                          | Office Sought: House Disbursen  | nent For:   |                             | - 1      | ype         |          |     | AE 844 | \ IT!                | -847    |      | ,      |          |       | _    |
|                          |   | Primary     | General                     |          |             |          | ĮI  | MEMO   | וווכ                 | =IVI J  |      |        |          |       |      |
|                          | President   | Other (spec | cify) 🔻                     |          |             |          |     |        |                      |         |      |        |          |       |      |
|                          | State: District:  |             |                             |          |             |          |     |        |                      |         |      |        |          |       |      |
| _                        | Full Name (Last, First, Middle Initial)   |             |                             |          |             |          | _   |        | , D.                 |         |      |        |          |       |      |
| C.                       | ADP, Inc.   |             |                             |          |             |          | U   | ate o  | וט ז                 | sburse  |      |        |          |       |      |
|                          | Mailing Address 504 Clinton Center Dr Ste. 4400   |             |                             |          |             |          |     | 08     | /                    | 2       |      | / Y    | 2014     | " Y   |      |
|                          | City  | State       | Zip Code                    |          |             |          |     |        |                      |         |      |        |          |       |      |
|                          |   | MS          | 39056                       |          |             |          |     | Trans  | sact                 | ion ID  | : D  | 467575 |          |       |      |
|                          | Purpose of Disbursement   |             |                             |          | -           | _        |     |        |                      |         |      |        |          |       |      |
|                          | Payroll - See Memos   |             |                             |          |             |          | Α   | moun   | t of                 | Each    | Dis  | bursem | ent this | Per   | riod |
|                          | Candidate Name  |             |                             |          | egor<br>ype | y/       | Г   |        |                      |         |      | -      | 176      | 0.20  | )    |
|                          | Office Sought: House Disbursen  | nent For:   |                             | '.       | ,,,,        | $\dashv$ |     |        |                      | 7       |      | 7      |          |       | -    |
|                          |   | Primary     | General                     |          |             |          |     |        |                      |         |      |        |          |       |      |
|                          | President   | Other (spec | cify) 🔻                     |          |             |          |     |        |                      |         |      |        |          |       |      |
|                          | State: District:  |             |                             |          |             |          |     |        |                      |         |      |        |          |       |      |
| s                        | UBTOTAL of Disbursements This Page (optional)   |             |                             |          |             |          |     |        |                      | -       |      | -      | 176      | 0.20  |      |
| H                        |   |             |                             |          |             | _        | Ė   | ÷      | ÷                    | 7       |      | ,      |          |       | =    |
| Т                        | OTAL This Period (last page this line number only)  |             |                             |          |             | •        |     |        |                      | 7       |      | - 7    |          | -     |      |

| SCHEDULE B (FEC Form 3X)   | Harris A. C. C. C. C.                             | FOR LINE          | NUMBER:                                 | PAGE 15 OF 17          |  |  |  |  |
|--|---|-------------------|---|------------------------|--|--|--|--|
| ITEMIZED DISBURSEMENTS   | Use separate schedule(s) for each category of the | (check only       | one)                                    |                        |  |  |  |  |
|  | Detailed Summary Page                             | X 21b 27          | 22 23<br>28a 28b                        | 24 25 26<br>28c 29 30b |  |  |  |  |
| Any information copied from such Reports and Stater or for commercial purposes, other than using the nan |   |                   |   |                        |  |  |  |  |
| NAME OF COMMITTEE (In Full)  Midwest Values PAC  |   |                   |   |                        |  |  |  |  |
| Full Name (Last, First, Middle Initial)  |   |                   | Date of Disburse                        | ament                  |  |  |  |  |
| A. ADP, Inc.   |   |                   | M M / D                                 |                        |  |  |  |  |
| Mailing Address 504 Clinton Center Dr Ste. 4400  |   |                   | 08 2                                    | 2014                   |  |  |  |  |
| City S<br>Clinton  | State Zip Code<br>MS 39056                        |                   | Transaction ID                          | : D467576              |  |  |  |  |
| Purpose of Disbursement Payroll Taxes  | 33030   |                   |   |                        |  |  |  |  |
| Candidate Name   |   | Catagony          | Amount of Each Disbursement this Period |                        |  |  |  |  |
|  |   | Category/<br>Type |   | 560.76                 |  |  |  |  |
| Office Sought: House Disburser  Senate President   | ment For:  Primary General  Other (specify) ▼     |                   | [MEMO ITEM]                             |                        |  |  |  |  |
| State: District:   |   |                   |   |                        |  |  |  |  |
| Full Name (Last, First, Middle Initial)  B. Emily M Smith  |   |                   | Date of Disburse                        | D / Y = Y = Y          |  |  |  |  |
| Mailing Address 415 Oak Grove Street, #521   | 08 2  | 29 2014           |   |                        |  |  |  |  |
| Minneapolis  | State Zip Code<br>MN 55403                        |                   | Transaction ID                          | ) : D467577            |  |  |  |  |
| Purpose of Disbursement Payroll  |   | · · ·             | Disbursement this Period                |                        |  |  |  |  |
| Candidate Name   |   | Category/<br>Type |   | 1199.44                |  |  |  |  |
|  | ment For: Primary General Other (specify)         |                   | [MEMO ITEM]                             |                        |  |  |  |  |
| State: District:  Full Name (Last, First, Middle Initial)  |   |                   |   |                        |  |  |  |  |
| C.   |   |                   | Date of Disburse                        |                        |  |  |  |  |
| Mailing Address  |   |                   |   |                        |  |  |  |  |
| City   | State Zip Code                                    |                   |   |                        |  |  |  |  |
| Purpose of Disbursement  |   |                   |   |                        |  |  |  |  |
| Candidate Name   | Category/<br>Type                                 |                   | Disbursement this Period                |                        |  |  |  |  |
| Office Sought:  Senate  President  State:  Disburser   | ment For: Primary ☐ General Other (specify) ▼     |                   | 7                                       |                        |  |  |  |  |
| SUBTOTAL of Disbursements This Page (optional)   |   |                   |   | 0.00                   |  |  |  |  |
| TOTAL This Period (last page this line number only)  |   |                   |   | 6440.25                |  |  |  |  |

| SCHEDULE B (FEC Form 3X)  |  | FOR LINE NUMBER: PAGE 16 OF 17 |  |  |  |  |  |  |  |  |  |
|---|--|--------------------------------|--|--|--|--|--|--|--|--|--|
| ITEMIZED DISBURSEMENTS  | Use separate schedule(s)                       | (check only                    | THOMBETT:                                  |  |  |  |  |  |  |  |  |
|   | for each category of the Detailed Summary Page | 21b                            | 22 🗙 23 24 25 26                           |  |  |  |  |  |  |  |  |
|   | Dotalica Gallinary Lage                        | 27                             | 28a 28b 28c 29 30                          |  |  |  |  |  |  |  |  |
| Any information copied from such Reports and State  |  |                                |  |  |  |  |  |  |  |  |  |
| or for commercial purposes, other than using the na   | me and address of any politic                  | al committee to                | solicit contributions from such committee. |  |  |  |  |  |  |  |  |
| NAME OF COMMITTEE (In Full)   |  |                                |  |  |  |  |  |  |  |  |  |
| Midwest Values PAC  |  |                                |  |  |  |  |  |  |  |  |  |
| / Full Name (Last, First, Middle Initial)   |  |                                |  |  |  |  |  |  |  |  |  |
| A. DEMOCRATIC STATE CENTRAL   | Date of Disbursement                           |                                |  |  |  |  |  |  |  |  |  |
| DEMOCIONIO OTATE CENTICAL   | , <b>`</b>                                     | M M / D D / Y Y Y Y            |  |  |  |  |  |  |  |  |  |
| Mailing Address POST OFFICE BOX 4385  |  | 08 20 2014                     |  |  |  |  |  |  |  |  |  |
|   |  |                                |  |  |  |  |  |  |  |  |  |
| City  | State Zip Code                                 |                                | Transaction ID : D466334                   |  |  |  |  |  |  |  |  |
| BATON ROUGE Purpose of Disbursement   | LA 70821                                       |                                |  |  |  |  |  |  |  |  |  |
| Contribution-Federal-2014   |  |                                | Amount of Each Disbursement this Period    |  |  |  |  |  |  |  |  |
| Candidate Name  |  | Catagony                       |  |  |  |  |  |  |  |  |  |
|   |  | Category/<br>Type              | 5000.00                                    |  |  |  |  |  |  |  |  |
| Office Sought: House Disburse   | ment For:                                      |                                |  |  |  |  |  |  |  |  |  |
| Senate  | Primary General                                |                                |  |  |  |  |  |  |  |  |  |
| President   | Other (specify) ▼                              |                                |  |  |  |  |  |  |  |  |  |
| State: District:  |  |                                |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)   |  |                                | Data of Dishumannant                       |  |  |  |  |  |  |  |  |
| B. PEOPLE FOR RICK WEILAND  |  | Date of Disbursement           |  |  |  |  |  |  |  |  |  |
| Mailing Address PO BOX 1488   |  |                                | 08 07 2014                                 |  |  |  |  |  |  |  |  |
| Mailing Address FO BOX 1400   |  |                                | 2014                                       |  |  |  |  |  |  |  |  |
| City  | State Zip Code                                 |                                | Transaction ID : D464886                   |  |  |  |  |  |  |  |  |
| SIOUX FALLS   | SD 57101                                       |                                | Transaction ib . 5404000                   |  |  |  |  |  |  |  |  |
| Purpose of Disbursement<br>Contribution   |  |                                | Amount of Each Disbursement this Period    |  |  |  |  |  |  |  |  |
| Candidate Name  |  |                                | Amount of Each disbursement this Feriod    |  |  |  |  |  |  |  |  |
| RICHARD PAUL WEILAND  |  | Category/<br>Type              | 2500.00                                    |  |  |  |  |  |  |  |  |
|   | ment For: 2014                                 | Турс                           | ,    |  |  |  |  |  |  |  |  |
| ▼ Senate  | Primary Seneral                                |                                |  |  |  |  |  |  |  |  |  |
| President   | Other (specify) ▼                              |                                |  |  |  |  |  |  |  |  |  |
| State: SD District: 00  |  |                                |  |  |  |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)   |  |                                |  |  |  |  |  |  |  |  |  |
| C. SCHATZ FOR SENATE  |  |                                | Date of Disbursement                       |  |  |  |  |  |  |  |  |
| NA 25 A LL 20 |  | M M / D D / Y Y Y Y            |  |  |  |  |  |  |  |  |  |
| Mailing Address PO BOX 3828   |  | 08 07 2014                     |  |  |  |  |  |  |  |  |  |
| City  | State Zip Code                                 |                                |  |  |  |  |  |  |  |  |  |
| HONOLULU  | HI 96812                                       |                                | Transaction ID : D464885                   |  |  |  |  |  |  |  |  |
| Purpose of Disbursement   |  |                                |  |  |  |  |  |  |  |  |  |
| Contribution  |  |                                | Amount of Each Disbursement this Period    |  |  |  |  |  |  |  |  |
| Candidate Name  |  | Category/                      | 2500.00                                    |  |  |  |  |  |  |  |  |
| BRIAN SCHATZ  | word fam. and                                  | Туре                           | 2000.00                                    |  |  |  |  |  |  |  |  |
| Office Sought: House Disburse   | ment For: 2014  Primary General                |                                |  |  |  |  |  |  |  |  |  |
| President   | Other (specify)                                |                                |  |  |  |  |  |  |  |  |  |
| State: HI District: 00  | Culor (opcomy)                                 |                                |  |  |  |  |  |  |  |  |  |
| 00  |  |                                |  |  |  |  |  |  |  |  |  |
| SUBTOTAL of Disbursements This Page (optional).   |  |                                | 10000.00                                   |  |  |  |  |  |  |  |  |
|   |  |                                |  |  |  |  |  |  |  |  |  |
| TOTAL This Period (last page this line number only  | )  |                                |  |  |  |  |  |  |  |  |  |

| SCHEDULE B (FEC Form 3X)  |   | FOR LINE NUMBER: PAGE 17 OF 17   |                           |   |  |  |  |  |  |  |
|---|---|----------------------------------|---------------------------|---|--|--|--|--|--|--|
| TEMIZED DISBURSEMENTS   | Use separate schedule(s) for each category of the               | (check only                      | one)                      |   |  |  |  |  |  |  |
|   | Detailed Summary Page   | 21b<br>27                        | 22 X 23 28b               | 24 25 26<br>28c 29 30                     |  |  |  |  |  |  |
| Any information conicd from such Denorte and Chalen   | nonto mou not be cold or  |                                  |                           |   |  |  |  |  |  |  |
| Any information copied from such Reports and Stater<br>or for commercial purposes, other than using the nan | nents may not be sold or used<br>ne and address of any politica | a by any perso<br>I committee to | solicit contributions fro | onciting contributions om such committee. |  |  |  |  |  |  |
| NAME OF COMMITTEE (In Full)   |   |                                  |                           |   |  |  |  |  |  |  |
| Midwest Values PAC  |   |                                  |                           |   |  |  |  |  |  |  |
| /   |   |                                  |                           |   |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)   | EDEDAL CAMBAION COL   |                                  | Data of Dialousassas      |   |  |  |  |  |  |  |
| A. WAKE COUNTY DEMOCRATIC PARTY FI  | Date of Disbursement  |                                  |                           |   |  |  |  |  |  |  |
| Mailing Address PO BOX 25548  |   | 08 20 2014                       |                           |   |  |  |  |  |  |  |
| 3 3 3 3 3 5 7 6 2 6 7 2 6 7 6   |   |                                  |                           |   |  |  |  |  |  |  |
| •   | State Zip Code  |                                  | Transaction ID : D        | 466335                                    |  |  |  |  |  |  |
| RALEIGH Purpose of Disbursement   | NC 27611  |                                  | Transaction is . s        | 40000                                     |  |  |  |  |  |  |
| Contribution-Federal-2014   |   |                                  | Amount of Each Dis        | bursement this Period                     |  |  |  |  |  |  |
| Candidate Name  |   | Octobrook                        | Amount of Euch Bio        | barsement this I choa                     |  |  |  |  |  |  |
|   |   | Category/<br>Type                |                           | 5000.00                                   |  |  |  |  |  |  |
| Office Sought: House Disburser  | nent For:   |                                  |                           | ,   |  |  |  |  |  |  |
| Senate  | Primary General   |                                  |                           |   |  |  |  |  |  |  |
| President   | Other (specify) ▼   |                                  |                           |   |  |  |  |  |  |  |
| State: District:  |   |                                  |                           |   |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)  3.   |   |                                  | Date of Disburseme        | nt  |  |  |  |  |  |  |
| ·   |   | M M / D D                        | / Y Y Y Y Y               |   |  |  |  |  |  |  |
| Mailing Address   |   |                                  | W - W   /   B - B         |   |  |  |  |  |  |  |
|   |   |                                  |                           |   |  |  |  |  |  |  |
| City  | State Zip Code  |                                  |                           |   |  |  |  |  |  |  |
| Purpose of Disbursement   |   |                                  |                           |   |  |  |  |  |  |  |
| ·   |   |                                  | Amount of Each Dis        | bursement this Period                     |  |  |  |  |  |  |
| Candidate Name  |   | Category/                        |                           |   |  |  |  |  |  |  |
|   |   | Type                             |                           |   |  |  |  |  |  |  |
| Office Sought: House Disburser  |   |                                  |                           |   |  |  |  |  |  |  |
| Senate President  | Primary General Other (specify) ▼                               |                                  |                           |   |  |  |  |  |  |  |
| State: District:  | Other (apochy)  |                                  |                           |   |  |  |  |  |  |  |
| Full Name (Last, First, Middle Initial)   |   |                                  |                           |   |  |  |  |  |  |  |
| C.  |   |                                  | Date of Disburseme        | nt  |  |  |  |  |  |  |
|   | M M / D D   | /                                |                           |   |  |  |  |  |  |  |
| Mailing Address   |   |                                  |                           |   |  |  |  |  |  |  |
| City  | State Zip Code  |                                  |                           |   |  |  |  |  |  |  |
| City  | 2.p 0000  |                                  |                           |   |  |  |  |  |  |  |
| Purpose of Disbursement   |   |                                  |                           |   |  |  |  |  |  |  |
|   |   |                                  | Amount of Each Dis        | bursement this Period                     |  |  |  |  |  |  |
| Candidate Name  |   | Category/                        |                           |   |  |  |  |  |  |  |
| Office Sought: House Disburser  | nont For:   | Туре                             |                           | 7   |  |  |  |  |  |  |
| Senate  | Primary General   |                                  |                           |   |  |  |  |  |  |  |
| President   | Other (specify) ▼   |                                  |                           |   |  |  |  |  |  |  |
| State: District:  | • • • •   |                                  |                           |   |  |  |  |  |  |  |
| ·   |   |                                  |                           |   |  |  |  |  |  |  |
| SUBTOTAL of Disbursements This Page (optional)  |   | ·····•                           |                           | 5000.00                                   |  |  |  |  |  |  |
|   |   |                                  |                           | 15000.00                                  |  |  |  |  |  |  |
| TOTAL This Period (last page this line number only)   |   |                                  |                           | 15000.00                                  |  |  |  |  |  |  |